

U.S. Department
of Transportation
**Federal Aviation
Administration**

**Flight Standards Service
Airmen Certification Branch, AFS-760**

P.O. Box 25082
Oklahoma City, Oklahoma 73125-0082
WEB Address: <http://registry.faa.gov>

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

April 24, 2015

NANCY R HARRISON
KPNX TV (NEWS CHANNEL)
307 W TORMEY DR
BUILDING 16 RM 101
FLAGSTAFF AZ 86002

A standard linear barcode consisting of vertical black bars of varying widths on a white background.

Dear Ms. Harrison:

RE: FOIA #2015-004666F7

Thank you for your request of March 31, 2015, made under the provisions of the Freedom of Information Act (FOIA) 5 U.S.C. §552, requesting a complete copy of the airman certification records for Andreas Guenter Lubitz.

Our records indicate Andreas Guenter Lubitz was issued student pilot certificate GX-000260689, dated June 18, 2010; private pilot (Foreign Based) - CFR 61.75 certificate 3613109, with ratings airplane single engine land, glider, issued on basis of and valid only when accompanied by Germany pilot license number (s) 27788 9460. All limitations and restrictions on the Germany pilot license apply, English Proficient, dated January 6, 2012.

The Airmen Certification Branch has identified the airman certificate file for Airman Lubitz as being responsive to your request. We are disclosing the complete airman file, in its entirety, except for redaction of the address that was provided on the temporary airman certificate and the FAA Form 8710-1. Pursuant to exemption 6 of FOIA, the address that was provided in the complete airman record has been redacted since the disclosure would be an unwarranted invasion of the family's privacy rights.

Exemption 6 of the FOIA 5 U.S.C. §552(b)(6) protects information that pertains to an individual "the disclosure of which would constitute a clearly unwarranted invasion of personal privacy". When applying Exemption 6, the FAA weighs the privacy interest of an individual against any public interest in the records.

In considering your request, we referred to Department of the Air Force v. Rose, 425 U.S. 352, 372 (1989) which held that, where a privacy interest is found to exist, a balancing between the rights of the individual concerned and any public interest in the disclosure must be performed. Further, we considered Department of Justice v. Reporters Committee for Freedom of the Press, 109 S. Ct. 1468, 1483 (1989) which held that if, on balance, personal data would not contribute significantly to the public understanding of the operation or activities of the government, then the information is protected from disclosure.

The person responsible for this partial denial is Robin M Thurman, Manager, Airmen Certification Branch.

You may request reconsideration of this determination by writing to the following address:

Federal Aviation Administration
Assistant Administrator for Finance and Management (AFN-1)
800 Independence Avenue, S.W.
Washington, D.C. 20591

Your request for reconsideration must be made in writing within 30 days from the date of receipt of this letter and must include all information and arguments relied upon. Your letter must state that it is an appeal from the above-described partial denial of a request made under the FOIA. The envelope containing the appeal must be prominently marked "FOIA".

If you require further assistance please contact the Airmen Certification Branch at (405) 954-3205 or toll free 1-866-878-2498.

Sincerely,



Jana L. Hammer
Acting Manager, Civil Aviation Registry

APP MIDDLE NAME : GUENTER

UNITED STATES OF AMERICA DEPARTMENT OF TRANSPORTATION - FEDERAL AVIATION ADMINISTRATION		III. CERTIFICATE NO. PENDING					
II. TEMPORARY AIRMAN CERTIFICATE							
THIS CERTIFIES THAT		IV. ANDREAS LUBITZ					
v. Exemption 6							
DATE OF BIRTH 12/18/1987	HEIGHT 68 IN	WEIGHT 154	HAIR BROWN	EYES BLUE	SEX M	NATIONALITY GERMANY	VI.
IX. Has been found to be properly qualified and is hereby authorized in accordance with the conditions of issuance on the reverse of this certificate to exercise the privileges of PRIVATE PILOT							
RATINGS AND LIMITATIONS AIRPLANE SINGLE ENGINE LAND XII. GLIDER ISSUED ON THE BASIS OF AND VALID ONLY WHEN ACCOMPANIED BY GERMANY PILOT CERTIFICATE NO. 27788 AND 9460. ALL XIII. LIMITATIONS AND RESTRICTIONS ON THE GERMANY PILOT CERTIFICATES APPLY.							
THIS IS <input checked="" type="checkbox"/> AN ORIGINAL ISSUANCE <input type="checkbox"/> A REISSUANCE OF THIS GRADE OF CERTIFICATE				DATE OF SUPERSEDED AIRMAN CERTIFICATE			
BY DIRECTION OF THE ADMINISTRATOR				EXAMINER'S DESIGNATION NO. OR INSPECTOR'S REG. NO.			
X. DATE OF ISSUANCE 01/06/2012		X. SIGNATURE OF EXAMINER OR INSPECTOR ROBERT E. STUNKARD		LAX-FSDO-WP23		DATE DESIGNATION EXPIRES	

FAA Form 8060-4 (8-78) USE PREVIOUS EDITION

Electronic Forms (PDF)

XIV. CONDITIONS OF ISSUANCE

This is an interim certificate issued subject to the approval of the Federal Aviation Administration pending the issuance of a certificate of greater duration. It becomes void—

1. Upon the receipt of a certificate of greater duration to replace it;
2. Upon a finding by the FAA that an error has been made in its issuance;
3. Upon a finding by the FAA that it was issued illegally or as the result of fraud or misrepresentation;
4. Upon the refusal or failure by the holder to accomplish a flight check by a Flight Standards Inspector if so requested; and
5. In any case, at the expiration of 120 days from date of issuance.

Electronic Forms (PDF)

DEPARTMENT OF TRANSPORTATION
FEDERAL AVIATION ADMINISTRATION

Airman Certificate and/or Rating Application

I. Application Information <input type="checkbox"/> Additional Rating <input type="checkbox"/> Flight Instructor Initial <input type="checkbox"/> Medical Flight Test		<input type="checkbox"/> Student <input checked="" type="checkbox"/> Airplane Single-Engine <input type="checkbox"/> Recreational <input type="checkbox"/> Airplane Multiengine <input type="checkbox"/> Reexamination <input type="checkbox"/> Reissuance of		<input checked="" type="checkbox"/> Private <input type="checkbox"/> Commercial <input type="checkbox"/> Rotorcraft <input type="checkbox"/> Additional Instructor Rating <input type="checkbox"/> Ground Instructor <input type="checkbox"/> Other		<input type="checkbox"/> Airline Transport <input type="checkbox"/> Balloon <input type="checkbox"/> Airship <input type="checkbox"/> Instrument <input type="checkbox"/> Glider <input type="checkbox"/> Powered-Lift	
A. Name (Last, First, Middle) <i>Lubitz Andreas Guenter</i>		B. SSN (US Only) <i>NONE</i>		C. Date of Birth Month <i>12</i> Day <i>18</i> Year <i>87</i>		D. Place of Birth <i>Neuburg/Donau/Germany</i>	
E. Address <i>Exemption 6</i>		F. Citizenship <input type="checkbox"/> USA <input checked="" type="checkbox"/> Other <i>German</i>		G. Do you read, speak, write, & understand the English language? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
H. Height <i>68</i>		I. Weight <i>154</i>		J. Hair <i>Brown</i>		K. Eyes <i>Blue</i>	
L. Sex <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female							
M. Do you now hold, or have you ever held an FAA Pilot Certificate? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		N. Grade Pilot Certificate <i>Student Pilot Certificate</i>		O. Certificate Number <i>6X-0260689</i>		P. Date issued <i>06/18/2010</i>	
Q. Do you hold a Medical Certificate? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		R. Class of Certificate <i>Class I / Germany</i>		S. Date issued <i>11/07/2011</i>		T. Name of Examiner <i>Dr. med. Guenter Gensrich / Lufthansa</i>	
U. Have you ever been convicted for violation of any Federal or State statutes relating to narcotic drugs, marijuana, or depressant or stimulant drugs or substances? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		V. Date of Final Conviction					

II. Certificate or Rating Applied For on Basis of:

<input type="checkbox"/> A. Completion of Required Test	1. Aircraft to be used (if flight test required)	2a. Total time in this aircraft / SIM / FTD hours	2b. Pilot in command hours
	1. Service	2. Date Rated	3. Rank or Grade and Service Number
<input type="checkbox"/> B. Military Competence Obtained In	4a. Flown 10 hours PIC in last 12 months in the following Military Aircraft:		4b. US Military PIC & Instrument check in last 12 months (List Aircraft)
	1. Name and Location of Training Agency or Training Center		1a. Certification Number
<input type="checkbox"/> C. Graduate of Approved Course	2. Curriculum From Which Graduated		3. Date
	1. Country <i>Germany</i>		2. Grade of License <i>Private Pilot License (Aeroplane) / CPL</i>
<input checked="" type="checkbox"/> D. Holder of Foreign License Issued By	3. Number <i>27788 / 9460</i>		4. Ratings <i>SE piston (land) / NFG Night Flying Qualification / aircraft tow launching / winch launching</i>
	1. Name of Air Carrier		2. Date
<input type="checkbox"/> E. Completion of Air Carrier's Approved Training Program	3. Which Curriculum <input type="checkbox"/> Initial <input type="checkbox"/> Upgrade <input type="checkbox"/> Transition		

III. RECORD OF PILOT TIME (Do not write in the shaded areas.)

	Total	Instruction Received	Solo	Pilot in Command (PIC)	Cross Country Instruction Received	Cross Country Solo	Cross Country PIC	Instrument	Night Instruction Received	Night Take-off Landings	Night PIC	Night Take-off Landing PIC	Number of Flights	Number of Aero-Tows	Number of Ground Launches	Number of Powered Launches
Airplanes				PIC SIC			PIC SIC				PIC SIC	PIC SIC				
Rotorcraft				PIC SIC			PIC SIC				PIC SIC	PIC SIC				
Powered Lift				PIC SIC			PIC SIC				PIC SIC	PIC SIC				
Glider																
Lighter Than Air																
Simulator Training Device																
PCATD																

IV. Have you failed a test for this certificate or rating? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
V. Applicant's Certification - I certify that all statements and answers provided by me on this application form are complete and true to the best of my knowledge and I agree that they are to be considered as part of the basis for issuance of any FAA certificate to me. I have also read and understand the Privacy Act statement that accompanies this form.	
Signature of Applicant <i>A. Lubitz</i>	Date <i>01/06/2012</i>

Instructor's Recommendation				
I have personally instructed the applicant and consider this person ready to take the test.				
Date	Instructor's Signature (Print Name & Sign)	Certificate No.	Certificate Expires	
Air Agency's Recommendation				
The applicant has successfully completed our _____ course, and is recommended for certification or rating without further _____ test.				
Date	Agency Name and Number	Officials Signature		Title
Designated Examiner or Airman Certification Representative Report				
<input type="checkbox"/> Student Pilot Certificate Issued (Copy attached) <input type="checkbox"/> I have personally reviewed this applicant's pilot logbook and/or training record, and certify that the individual meets the pertinent requirements of 14 CFR Part 61 for the certificate or rating sought. <input type="checkbox"/> I have personally reviewed this applicant's graduation certificate, and found it to be appropriate and in order, and have returned the certificate. <input type="checkbox"/> I have personally tested and/or verified this applicant in accordance with pertinent procedures and standards with the result indicated below.				
<input type="checkbox"/> Approved - Temporary Certificate Issued (Original Attached) <input type="checkbox"/> Disapproved - Disapproval Notice Issued (Original Attached)				
Location of Test (Facility, City, State)		Duration of Test Ground Simulator/FTD Flight		
Certificate or Rating for Which Tested		Type(s) of Aircraft Used	Registration No.(s)	
Date	Examiner's Signature (Print Name & Sign)	Certificate No.	Designation No.	Designation Expires
Evaluator's Record (Use For ATP Certificate and/or Type Ratings)				
	Inspector	Examiner	Signature and Certificate Number	Date
Oral	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Approved Simulator/Training Device Check	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Aircraft Flight Check	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Advanced Qualification Program	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Aviation Safety Inspector or Technician Report				
I have personally tested this applicant in accordance with or have otherwise verified that this applicant complies with pertinent procedures, standards, policies, and or necessary requirements with the result indicated below.				
<input checked="" type="checkbox"/> Approved - Temporary Certificate Issued (Original Attached) <input type="checkbox"/> Disapproved - Disapproval Notice Issued (Original Attached)				
Location of Test (Facility, City, State)		Duration of Test Ground Simulator/FTD Flight		
Certificate or Rating for Which Tested		Type(s) of Aircraft Used	Registration No.(s)	
<input type="checkbox"/> Student Pilot Certificate Issued <input checked="" type="checkbox"/> Certificate or Rating Based on <input type="checkbox"/> Examiner's Recommendation <input type="checkbox"/> Military Competence <input type="checkbox"/> Accepted <input type="checkbox"/> Rejected <input checked="" type="checkbox"/> Foreign License <input type="checkbox"/> Release or Exchange of Pilot Certificate <input type="checkbox"/> Approved Course Graduate <input type="checkbox"/> Special Medical test conducted -- report forwarded to Aeromedical Certification Branch, AAM-330 <input type="checkbox"/> Other Approved FAA Qualification Criteria				
<input type="checkbox"/> Flight Instructor <input type="checkbox"/> Ground Instructor <input type="checkbox"/> Renewal <input type="checkbox"/> Reinstatement Instructor Renewal Based on <input type="checkbox"/> Activity <input type="checkbox"/> Training Course <input type="checkbox"/> Test <input type="checkbox"/> Outlets end			Responsibilities	
Training Course (FIRC) Name		Graduation Certificate No.		Date
Date	Inspector's Signature (Print Name & Sign)	Certificate No.	FAA District Office	
01/06/2012	Robert E. Stankard	ATP1364851	WP23 LAXFSD	
Attachments: <input type="checkbox"/> Student Pilot Certificate (Copy) <input type="checkbox"/> Knowledge Test Report <input type="checkbox"/> Temporary Airman Certificate <input type="checkbox"/> Notice of Disapproval <input type="checkbox"/> Superseded Airman Certificate				
<input checked="" type="checkbox"/> Airman's Identification (ID) Form of ID: <u>C2X909 P2R</u> Number: <u>04/25/2014</u> Expiration Date: _____ Telephone Number: _____				
ID: _____ Name: _____ Date of Birth: _____ Certificate Number: _____ E-Mail Address: <u>andreaslubitz@aol.com</u>				



U.S. Department
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Flight Standards Service
Airmen Certification Branch, AFS-760

P.O. Box 25082
Oklahoma City, Oklahoma 73125-0082
WEB Address: <http://registry.faa.gov>

September 30, 2011

This information was also sent to:
SO-19 on 10/27/2011
WP-23 on 12/12/2011

FAA
EA FSDO 25 (Teterboro, NJ)
PARK 80 WEST PLAZA 1
250 PEHLE AVE, STE 003
SADDLE BROOK NJ 07663
|||||

The Airmen Certification Branch, AFS-760, has received the confirmation below that the following airman's foreign license and medical certificate or endorsement have been verified as current and valid by the Germany Civil Aviation Authority.

Name: Andreas Lubitz
License Number(s): 27788, 9460

"Herewith it is certified that the licence of Mr. Andreas Lubitz,
certificate number 27788 valid until 28.02.2016
Level of certificate: Luftfahrerschein für Privatflugzeugführer/Private
Pilot Licence (Aeroplane)
issued in accordance with JAR-FCL german version
issued in accordance with ICAO Standards
Class/Type/Instrument:
SE piston (land)
PIC bis/until 28.02.2013
sonstige Berechtigungen / others:
NFO, Nachtflugqualifikation / Night Flying Qualification
Language proficiency:
Englisch/English Level: 4 bis/until 12.04.2014
Remarks:
*****keine Eintragungen/no entries*****
Issuing board: Senator für Wirtschaft und Häfen
Issuing date: 01.03.2011
The licence is only valid together with the valid medical.
The licence isn't currently under suspension or revocation.

+++++

Herewith it is certified that the licence of Mr. Andreas Lubitz,
certificate number 9460 valid until unbefristet/not limited
Level of certificate: Luftfahrerschein für Segelflugzeugführer/Glider
Pilot Licence

issued in accordance with ICAO Standards

Class/Type/Instrument:

Segelflugzeuge

Pilot, Luftfahrzeugführer / Pilot

ST/LFZ, Schleppstart hinter Luftfahrzeugen / aircraft tow
launching

ST/WST, Windenstart / winch launching

Language proficiency:

*****keine Eintragungen/no entries*****

Remarks:

*****keine Eintragungen/no entries*****

Issuing board: Landesbetrieb Mobilität Rheinland-Pfalz

Issuing date: 30.05.2005

The licence is only valid together with the valid medical.

The licence isn't currently under suspension or revocation."

The Airmen Certification Branch only verified the applicant's foreign license number, the level of the license, and that the license has not been surrendered, suspended, revoked, or expired.

NOTE: Before exercising the privileges of the FAA pilot certificate, the pilot must comply with the pertinent rules and requirements contained in 14 CFR Part 61 and 14 CFR Part 91. (§61.56 flight review requirements, recency of experience requirements, §61.58 PIC proficiency check, §61.51 required logbook entries, etc.)

The applicant MUST provide appropriate documentation that rating(s) held on the foreign license parallel U.S. rating(s) in accordance with 14 CFR §61.5(b) or §63.33(a). The Flight Standards District Office or Designated Examiner has the responsibility to determine if the ratings on the foreign license conform to the appropriate Code of Federal Regulation.

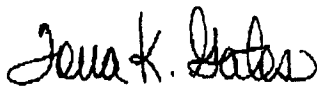
This applicant is authorized to apply for a U.S. airman certificate in accordance with 14 CFR §61.39, §61.75, §61.77, §61.123, §61.153, §63.23, or §63.42. If the applicant is applying based on the completion of a practical test solely in a simulator, then a medical certificate is not required in accordance with §61.23 (b)(8). In order to exercise the privileges of a U. S. airman certificate, the airman must hold the proper medical certificate.

Receipt of this Verification Letter of Authenticity does not guarantee the issuance of an FAA certificate. In accordance with 14 CFR §61.13(a)(2)(ii), "an applicant may be refused issuance of any U.S. airman certificate, rating, or authorization by the Administrator."

Foreign applicants who require a visit to an FAA Flight Standards District Office or are applying for the issuance or replacement of an airman certificate in accordance with 14 CFR §61.75 must contact their selected Flight Standards District Office upon receipt of this verification to schedule an appointment with a FAA Inspector. Do not anticipate an appointment earlier than two weeks after this initial contact, due to enhanced security procedures.

This authorization expires March 31, 2012. If the foreign license and medical certificate or endorsement expires prior to the expiration date shown on this letter, this verification is no longer valid and cannot be used to make application for a U.S. airman certificate or authorization.

Sincerely,

A handwritten signature in black ink, appearing to read "Tona K. Gates". The signature is fluid and cursive, with the first name "Tona" being more prominent.

Tona K. Gates

Manager, Airmen Certification Branch